Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011

Phone

: (844)386-0178 Fax Number : (214)317-4754

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				

COR AMND/RESTATE/CORRECT OR O/D RESIGN LCM IMAGING, INC.

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Corporate Filing Menu

Help

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Articles of Amendment to Articles of Incorporation of

LCM IMAGING, INC.				
· · · · · · · · · · · · · · · · · · ·	on as currently filed with th	e Florida Dept. of State)	
P98000009600				
(Docum	ent Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit	Corporation adopts the f	ollowing amendr	nent(s) to
A. If amending name, enter the new name of the co	rporation:			
			The ne	*11.7
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional		reviation "Corp.	,,,
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>))0Z3	
			5	
	-		<u> </u>	CHARGE CLEURS
C. Enter new mailing address, if applicable:			9	∯ 5
(Mailing address MAY BE A POST OFFICE BOX	<u></u>		OC B	
			Da O	
			30	
D. If amending the registered agent and/or registere	ed office address in Florida,	enter the name of the		
new registered agent and/or the new registered o	ffice address:			
Name of New Registered Agent				
	(Florida street address)		<u></u>	
V 0 100 444		171 / 1		
New Registered Office Address:	(Ciny)	, Florida	(Zip Code)	
	•		•	
New Registered Agent's Signature, if changing Regis				
hereby accept the appointment as registered agent. I	am familiar with and accept	the obligations of the pos	sition.	
Signati	ure of New Registered Agent,	if changing		
_				
Jheck if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John D	<u>toe</u>		
X Remove	<u>V</u> <u>Mike J</u>	ones		
X Add	SV Sally S	mith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
i) Change	CEO	KEVIN JOHNSON	8300 W SUNRISE BLVD	
Add			PLANTATION, FL 33322	
A Remove 2) Change	CEO/President/Director	Darren Speed	8300 W SUNRISE BLVD	
XAdd			Plantation, FL, 33322	
Remove 3) Remove X Add	Scereta <u>ry/CFO/Di</u> rector	Minal Amin	8300 W SUNRISE BLVD Plantation, FL, 33322 E. 20 Plantation FL, 33322 E. 20 Plantati	مالتا
Add Remove 4) Change Add	***********		= 3	
Remove 5) Change Add			30	
Remove 6) Change Add				
Remove				

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E. If amending or adding additional Articles, enter change(s) here:	({(H2300)	usossa	10 J)
(Attach additional sheets, if necessary). (Be specific)			
			
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	55	2 023 ∤ 10V	
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	<u> </u>		: ===
	NS NS	9	6
		<u> </u>	(T)
	m _e	ö	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	إجزائم	AM 10: 30	
provisions for implementing the amendment if not contained in the amendment itself:		_	
(if not applicable, indicate N/A)			
•			
			

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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will be considered by the contract of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☑ The amendment(s) was/were ad action was not required.	lopted by the incorporators, or board of directors without shareholder action and	d shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	15	
	(voting group)	
November Dated	2nd, 2023	
Signature	Dougla dried	
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	_
	Darren Speed	° 20
	(Typed or printed name of person signing)	AON Edition
	President	
	(Title of person signing)	9 AM 10: 30